SEEC FORM 30

Itemized Campaign Finance Disclosure Statement
Candidates for Statewide Offices and General Assembly
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Rev. 1/08



Electronic Filing

Page 1 of 31

SUMMARY PAGE

1.NAME OF COMMITTEE							2. TYI	PE OF COMMITTEE			
Jason 2010							x Candidate Committee Exploratory Committee				
3. TREASURER NAME											
Title	First Janice			MI H	Last Stevenson			Suffix			
4. TREASURER ADDRESS											
Street Address			City			State		Zip Code			
32 Sunset Hill Rd			Bethe	I		СТ		06801			
5. ELECTION DATE			6. O	FFICE SOUG	HT (if applicable)		7. DISTR	CICT CODE (if applicable)			
11/02/2010		State Representativ	re				R002				
8. CANDIDATE NAME	•					•					
Title	First Jason			МІ w.	Last Bartlett			Suffix			
9. TYPE OF REPORT								•			
July 10 Filing - Origina	I										
10. PERIOD COVERED											
	Beginning Date Ending Date										
		05/29/2010	thru	ı	06/30/2010						
			11 CER	TIFICATION							
	ed Campaig	under penalties of false	statem	nent, that all	of the information set forth period covered is true,						
Electronic Filing SIGNATURE		Janice Stevenson PRINT NAME OF THI	E SIGNE	R		./2010 CERTIFIED					
					LE BY FINE NOT TO EXCEED IAN ONE YEAR, OR BOTH.						

SEEC FORM 30 Itemized Campaign Finance Disclosure Statement Candidates for Statewide Offices and General Assembly CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION Rev. 1/08

SUMMARY PAGE TOTALS

NAME OF COMMITTEE	FILING DUE DATE	
Jason 2010	Original 07/12/2010	
	COLUMN A This Period	COLUMN B Aggregate
12. Balance on hand from day Committee was formed		\$0.00
13. Balance on hand at the beginning of Reporting Period	\$0.00	
14. Contributions received from Individuals (Section A and B)	\$1,255.00	\$1,255.00
15. Receipts from Other Committees (Sections C1 + C2)	\$207.45	\$207.45
16. Other Monetary Receipts (Section D-I)	\$0.00	\$0.00
17. Total Proceeds from Tag Sales, Auctions or Other Sales (Section J2)	\$0.00	\$0.00
18. Total Monetary Receipts (add totals for lines 14-17)	\$1,462.45	\$1,462.45
19. Subtotals (add totals in line 13 + line 18 in Column A and in lines 12 + 18 in Column B)	\$1,462.45	\$1,462.45
20. Expenses Paid by Committee (Section N)	\$33.24	\$33.24
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19)	\$1,429.21	\$1,429.21
22. In-Kind Donations not Considered Contributions Received (Section J3)	\$0.00	\$0.00
23. In-Kind Contributions Received (Section K)	\$0.00	\$0.00
24. Refundable Deposit to Telephone Company (Section L)	\$0.00	\$0.00
25. Receipts of Organization Expenditures (Section M)	\$0.00	\$0.00
26. Beginning Loan Balance	\$0.00	\$0.00
26a. + Loans Received (Section D)	\$0.00	\$0.00
26b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00
26c Payments on Loan(s)	\$0.00	\$0.00
26d. Total Outstanding Loan Amount	\$0.00	\$0.00
27. Campaign Expenses Paid By Candidate (Section O)	\$234.20	\$234.20
28. Expenses Incurred on Committee Credit Card (Section P)	\$0.00	\$0.00
29. Expenses Incurred by Committee During this Period but Not Paid (Section Q)	\$329.58	
29a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section Q)	\$329.58	

		I. MONETA	ARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jason 2010									Origina	al 07/12/2010
A. Total Contributions from		Contributors-Re	ceived thi	s Perio		total Section A	\$0.00			
		B. Itemized C	Contributio	ns from	Individu	als				
Last Name Saadi	First Name Thomas			MI J	Method of o	=	nal Check /Debit Card	Contribution 0001	on ID#	Amount of Contribution
Residential Street Address 24 Tobins Ct		City Danbury			State CT	Zip Code 06810		Oate Received 05/29/2010)	
Principal Occupation Attorney		Name of Employer State of CT				Is this contribution as: fundraising event liste If yes, list Event #		J1? 느	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legis	X No	dependent	utor a lobbyist child of a lob es	byist?	Aggre	egate Contribu \$	tions 50.00	\$50.00
Last Name Adams	First Name Taylor			MI	Method of o	=	nal Check /Debit Card	Contribution 0002	on ID#	Amount of Contribution
Residential Street Address 248 Greenwood Aveneu		City Bethel			State CT	Zip Code 06801		Oate Received 05/29/2010)	
Principal Occupation Student		Name of Employer None				Is this contribution as: fundraising event liste If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legis	X No	dependent	utor a lobbyist child of a lob	byist?	Aggre	egate Contribu \$	tions 20.00	\$20.00
Last Name Gogliettino	First Name John			MI C	Method of o	X Person	nal Check /Debit Card	Contribution 0003	on ID #	Amount of Contribution
Residential Street Address 129 Lake Pl		City Danbury			State CT	Zip Code 06813		Oate Received 06/03/2010)	
Principal Occupation Insurance Broker		Name of Employer Self				Is this contribution as: fundraising event liste If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legis	X No	dependent	child of a lob	byist?	Aggre	egate Contribu \$1	tions .00.00	\$100.00
Last Name Adams	First Name Kenneth	ı		MI	Method of o	=	nal Check /Debit Card	Contribution 0004	on ID#	Amount of Contribution
Residential Street Address 248 Greenwood Ave		City Bethel			State CT	Zip Code 06801		Oate Received 06/03/2010)	
Principal Occupation Finance		Name of Employer TIAA-CREF				Is this contribution as: fundraising event liste If yes, list Event #		J1? 느	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legis	X No	dependent	utor a lobbyist child of a lob	byist?	Aggre	egate Contribu \$	tions 550.00	\$50.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jason 2010									Origin	al 07/12/2010
		B. It	emized Contributi	ons fron	Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Adams	Kimberly				Cash Money	y Order X Personal C		0005		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
248 Greenwood Ave		Bethel			СТ	06801	0	6/03/2010	ı	
Principal Occupation		Name of E	mployer		•	Is this contribution associ			Yes	
Life Coach		Self				fundraising event listed in If yes, list Event #	Section J	x x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:	П	Executive	Legislative	I '─	child of a lob	,		\$	50.00	\$50.00
Last Name	First Name			MI		contribution:	<u> </u>	Contributio	n ID #	
Hutchinson	Alice				Cash	y Order Personal Credit/De		0008	II ID #	Amount of Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
153 Rockwell Rd		Bethel			CT	06801		6/15/2010	ı	
Principal Occupation		Name of Er	mployer			Is this contribution associ	ated with	a 🔲	Yes	
N/A		None				fundraising event listed in If yes, list Event #	Section J	11?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$1	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Taborsak	Lynn			Н	Cash Money	y Order X Personal C		0009		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
110 Hayestown Rd		Danbury			СТ	06811	0	6/16/2010		
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in			Yes	
Retired		Retired				If yes, list Event #	r section s	х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of		E	T a mind address		child of a lob	*		\$	50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	1		<u> </u>	1		
Last Name Lawlor	First Name Carol			MI J	Cash	contribution: X Personal C	Check	Contribution 0011	n ID#	Amount of Contribution
					Money	y Order Credit/De	bit Card			
Residential Street Address 40 Shelley Rd		City Bethel			State CT	Zip Code 06801		ate Received 6/20/2010		
,					Ci	Is this contribution associ			1	•
Principal Occupation Dtr. Payroll & Comp		Name of Er Quinnipi	mployer ac University			fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	byist?	Aggre	gate Contribut	tions 50.00	\$50.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No		Ψ		¥30.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jason 2010									Origin	al 07/12/2010
		B. It	emized Contributi	ions from	Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Lawlor	Martin			J	Cash Money	y Order		0010		Contribution
Residential Street Address	ı	City		1	State	Zip Code	D	ate Received		
40 Shelley Rd		Bethel			СТ	06801	0	6/20/2010)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	İ
Attorney		Savings	Bank of Danbury			fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribut	tions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	*		\$	50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+ =	1			1		<u> </u>
Last Name Olson	First Name David			MI R	Method of Cash	contribution: X Personal C	Check	Contributio	n ID#	Amount of Contribution
					Money	y Order Credit/Del	bit Card	0006		
Residential Street Address		City			State	Zip Code	D	ate Received		
5 Wagon Rd		Bethel			СТ	06801	0	6/20/2010)	
Principal Occupation		Name of Er				Is this contribution associ- fundraising event listed in			Yes	
Consultant		Strategy	Advisors, LLC			If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$1	00.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+ =	1		<u> </u>	1		
Last Name Olson	First Name Carol			MI B	Method of Cash	contribution: X Personal C	Check	Contributio	n ID#	Amount of Contribution
		1			Money	y Order Credit/Del	bit Card	0007		
Residential Street Address		City			State	Zip Code		ate Received		
5 Wagon Rd		Bethel			СТ	06801	0	6/20/2010)	ļ
Principal Occupation		Name of Er				Is this contribution associ- fundraising event listed in		J1?	Yes	
Paraprofessional		betnei P	ublic Schools			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of		E	Legislative		child of a lob	-		\$	25.00	\$25.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	1		<u> </u>	1		
Last Name Saadi	First Name Thomas			MI J	Method of Cash	contribution: X Personal C	Check	Contributio	n ID#	Amount of Contribution
					Money	y Order Credit/Del	bit Card	0030		
Residential Street Address		City			State	Zip Code		ate Received		
24 Tobins Ct		Danbury			СТ	06810	0	6/22/2010)	
Principal Occupation		Name of Er				Is this contribution associ- fundraising event listed in			Yes	
Attorney		State of	CI			If yes, list Event #		Х	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribut	tions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	75.00	\$25.00
government the contract is with:	Ш	Executive	Legislative	L Y	res x	No				<u> </u>

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILINC	DUE DATE
Jason 2010									Origina	al 07/12/2010
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name Pitt	First Name Robert			MI F	X Cash	contribution: Personal C y Order Credit/Det		Contribution 0018	ı ID#	Amount of Contribution
Residential Street Address 3 Vera Dr		City Bethel			State CT	Zip Code 06801		ate Received 6/29/2010		
Principal Occupation Attorney		Name of E	nployer			Is this contribution association fundraising event listed in If yes, list Event # 062		1?		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contributio	5.00	\$5.00
Last Name Adams	First Name Kimberly			MI	Cash	contribution: X Personal C y Order Credit/Del		Contribution 0031	i ID#	Amount of Contribution
Residential Street Address 248 Greenwood Ave		City Bethel			State CT	Zip Code 06801		ate Received 6/29/2010		
Principal Occupation Life Coach		Name of E	nployer			Is this contribution association fundraising event listed in If yes, list Event # 062	Section J	1?		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contributio	ions 70.00	\$20.00
Last Name Wilson	First Name Andrea			MI L	Cash	contribution: X Personal C		Contribution 0025	ı ID#	Amount of Contribution
Residential Street Address 111 Nashville Rd		City Bethel			State CT	Zip Code 06801		ate Received 6/29/2010		
Principal Occupation N/A		Name of E	nployer			Is this contribution association fundraising event listed in If yes, list Event # 062	Section J	1?		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contributio	ions 20.00	\$20.00
Last Name Straiton	First Name Sharon			MI J	Cash	contribution: X Personal C y Order Credit/Del		Contribution 0017	ı ID#	Amount of Contribution
Residential Street Address 7 Codfish Hill Rd		City Bethel			State CT	Zip Code 06801		ate Received 6/29/2010		
Principal Occupation Retired		Name of E	nployer			Is this contribution association fundraising event listed in If yes, list Event # 062	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribution \$5	ions 50.00	\$50.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jason 2010									Origin	al 07/12/2010
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI		contribution:		Contributio	n ID#	Amount of
Chiara	Nick				X Cash Money	y Order Personal C		0022		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
12 Huntington Ct		Bethel			СТ	06801	0	6/29/2010)	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	
Tech. Asst.		CT-N				fundraising event listed in If yes, list Event # 06	Section J 292010		No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contribu	tions	ĺ
state contractor? Is yes, indicate which branch or branches of		F		I -	child of a lob	•			\$5.00	\$5.00
government the contract is with:		Executive	Legislative	+-	1			1		<u> </u>
Last Name Chiara	First Name Mario			MI	Method of Cash	contribution:	Check	Contributio	n ID#	Amount of Contribution
Cinara	Mario					y Order Credit/Del		0019		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
12 Huntington Ct		Bethel			СТ	06801	0	6/29/2010)	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Sales		ICSC				If yes, list Event # 06.			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribu	tions	İ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-			\$5.00	\$5.00
government the contract is with:		Executive	Legislative	+-			<u> </u>	1		
Last Name Chiara	First Name Linda			MI	Method of Cash	contribution: Personal C	Check	Contributio	n ID#	Amount of Contribution
S.maru	2				_	y Order Credit/Del	bit Card	0020		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
12 Huntington Ct		Bethel			СТ	06801	0	6/29/2010)	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Writer		Self				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	tions	İ
state contractor? Is yes, indicate which branch or branches of			_	dependent	child of a lob	byist?	7.55.0	-	\$5.00	\$5.00
government the contract is with:	<u>. </u>	Executive	Legislative	Y	res x	No		1		
Last Name	First Name			MI		contribution:	31 1	Contributio	n ID#	Amount of
Chiara	David	_			= -	y Order Personal C		0021		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
12 Huntington Ct		Bethel			СТ	06801	0	6/29/2010)	ļ
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Sales		GNC				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	tions	İ
state contractor? Is yes, indicate which branch or branches of			_		child of a lob	-			\$5.00	\$5.00
government the contract is with:	Ш	Executive	Legislative	∐ У	res x	No				1

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jason 2010									Origin	al 07/12/2010
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Carruthers	Thomas			W	Cash Money	y Order X Personal Credit/De		0024		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
7 Vera Dr		Bethel			СТ	06801	0	6/29/2010)	
Principal Occupation Entertainment		Name of Er Self	nployer			Is this contribution assoc fundraising event listed in If yes, list Event # 06		J1?	Yes	
				_			<u> </u>	<u> </u>	•	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
government the contract is with:	First Name		Degisiante	MI		contribution:	<u> </u>	1	"	
Cipot	Lo			A	Cash	y Order Personal Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
13B Fleetwood Ave		Bethel			СТ	06801	0	6/29/2010)	
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc	iated with	a x	Yes	
Accountant		Memry C	Corporation			fundraising event listed in If yes, list Event # 06		J1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	itions 520.00	\$20.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID#	Amount of
Johnson	Lisa			М	Cash Money	y Order		0014		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
76 Benedict Rd		Bethel			СТ	06801	0	6/29/2010)	
Principal Occupation Hotel Sales Manager		Name of Er Best We	nployer stern Berkshire Inn			Is this contribution assoc fundraising event listed in If yes, list Event # 06	n Section .	^{J1?}	Yes No	
				1			1	<u> </u>		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	E	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	tions 325.00	\$25.00
government the contract is with:		Executive	Legislative				<u> </u>	1		
Last Name Garcia	First Name Magdalen	a		MI	Cash	contribution: X Personal y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
143 Bradley St		New Hav	en		СТ	06511	1	6/29/2010)	
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc		1^	Yes	
RE Specialist		Cartus				fundraising event listed in If yes, list Event # 06		J1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	tions .00.00	\$100.00
government the contract is with:		Executive	Legislative		res X	No				

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jason 2010									Origin	al 07/12/2010
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI		contribution:		Contributio	on ID#	Amount of
Weiss	Steve				X Cash Money	y Order Personal C		0023		Contribution
Residential Street Address	I	City			State	Zip Code		ate Received		
50 Taylor Ave		Bethel			СТ	06801	0	6/29/2010	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ	ated with	a x	Yes	
Life Guard		Wilton Y	MCA			fundraising event listed in If yes, list Event # 06	Section . 292010	J1?	No	
Is contributor a principal of a state contractor of	or prospective	1	Yes X No		utor a lobbyis	-	Aggre	gate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	Î	child of a lob	•			\$5.00	\$5.00
government the contract is with: Last Name	First Name			MI	1	contribution:	<u> </u>	Contribution	on ID #	
Stephan	Claudia				x Cash	Personal C		0026	on id#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		1
109 Walnut Hill Rd		Bethel			СТ	06801		6/29/2010		
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	İ
Financial Analyst		IBM Glol	bal Business Services	5		fundraising event listed in If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$	\$20.00	\$20.00
government the contract is with: Last Name	First Name	Executive	Degislative	I _{MI}		contribution:	<u> </u>			<u> </u>
Halfar	Christine			IVII	Cash	X Personal C	Check	Contribution 0027	on ID#	Amount of Contribution
		1			Money	y Order Credit/De	bit Card	0027		
Residential Street Address		City			State	Zip Code		ate Received		
8 Settlers Hill Rd		Danbury			СТ	06811	_	6/29/2010		
Principal Occupation Retired		Name of Er Retired	mployer			Is this contribution associ fundraising event listed in		J1?	Yes	
Retired		Recircu				If yes, list Event # 06	292010	<u>n</u> L	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$	\$50.00	\$50.00
government the contract is with: Last Name	First Name	LACCULIVE	Degislative	MI	1	contribution:	<u> </u>		ID //	<u> </u>
Lewis	Trisha			IVII	Cash	X Personal C	Check	Contribution 0013	on ID#	Amount of Contribution
					Money	y Order Credit/De	bit Card	0013		
Residential Street Address		City			State	Zip Code		ate Received		
137 Rockwell Rd		Bethel			СТ	06801	_	6/29/2010		
Principal Occupation		Name of En	mployer			Is this contribution associ fundraising event listed in		J1?	Yes	
N/A						If yes, list Event # 06	<u>292010</u>	<u>N</u> L	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$	\$25.00	\$25.00
government the contract is with:			Logisium vo	<u> </u>	Ц		1			L

		I. N	MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jason 2010									Origina	al 07/12/2010
		B. It	temized Contributi	ons fron	ı Individu	ıals				
Last Name Lewis	First Name Morton			MI R	Cash	contribution: X Personal C y Order Credit/Deb		Contribution 0012	n ID#	Amount of Contribution
Residential Street Address 137 Rockwell Rd		City Bethel			State CT	Zip Code 06801		ate Received 6/29/2010		
Principal Occupation N/A		Name of E None	imployer			Is this contribution associa fundraising event listed in If yes, list Event # 062		1? ഥ	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribut \$:	ions 25.00	\$25.00
Last Name Shannon	First Name William			MI P	Cash	contribution: X Personal C y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 2 Blackman Ave		City Bethel			State CT	Zip Code 06801		ate Received 6/29/2010		
Principal Occupation Retired		Name of E Retired	mployer		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J	1? ഥ	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contribut \$	ions 50.00	\$50.00
Last Name Shannon	First Name Jane			MI D	Cash	contribution: X Personal C y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 2 Blackman Ave		City Bethel			State CT	Zip Code 06801	1 1	ate Received 6/29/2010		
Principal Occupation Retired		Name of E Retired	imployer			Is this contribution associa fundraising event listed in If yes, list Event # 062			Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contribut \$3	ions 50.00	\$50.00
								Total of S	ection B	\$1,255.00
TOTAL OF ALL CONTRIBU	JTIONS FI	ROM IND	DIVIDUALS	(Section	ons A & B) (Total on Line 14	of Summ	ary Page)		\$1,255.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	DUE DATE			
Jason 2010							Original	07/12/2010			
C1. Con	ntributi	ons	from Other Co	ommit	ttees						
Name of Committee					Name of Treasurer						
Address			Is this contribution a fundraising event			Yes If yes, list Event	#	Amount of Contribution			
City	State	Zip	Code	Date R	eceived	Aggregate Contributions					
						Total of S	Section C1				

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE				FILING DUE DATE							
Jason 2010				Original 07/12/2010							
C2. Reimbursements or Payments from other Committees											
Name of Committee Friends of Jason Bartlett			Name of Treasurer Janice H. Stevenson								
Address 32 Sunset Hill Rd			Date Received 06/08/2010	Amount of Receipt							
City Bethel	State CT	Zip Code 06801	Reimbursement for shared expense Payment for goods and services	\$195.00							
Name of Committee Friends of Jason Bartlett			Name of Treasurer Janice H. Stevenson								
Address 32 Sunset Hill Rd			Date Received 06/24/2010	Amount of Receipt							
City Bethel	State CT	Zip Code 06801	Reimbursement for shared expense Payment for goods and services	\$12.45							
			Total of Section	n C2 \$207.45							

I. MONETARY RECEIPTS (Section A-K)											
NAME OF COMMITTEE					FILING	DUE DATE					
Jason 2010	Original	1 07/12/2010									
	D. Loans Received this Period										
Name of Lender				Source of Loan:	Is there a cosigner or Guarantor of	Amount Received					
Street Address	City	State	Zip Code	Candidate Individual	this loan?						
Name of Cosigner/Guarantor	Other Committee	No									
Street Address	City	State	Zip Code	Date Received							
Total of Section D											

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE					FILING DUE DATE				
Jason 2010 Original									
	E. Personal Funds of the Candidate Received this Period								
Date Received	Amount	Method of Payment	Cash	Personal Check	Credit/Debit Card				
	ı E								

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTE	NAME OF COMMITTEE								
Jason 2010	Original 07/12/2010								
	F. Anonymous Contributions								
Date Received	\$ 1 bills	\$ 5 bills \$ 10 bill coins							

I. Monetary Receipts (Section A-I)										
NAME OF COMMITTEE					FILING DUE DATE					
Jason 2010	Origi	nal 07/12/2010								
G. Interest from Deposits in Authorized Accounts										
Name of Institution		Date Received		Total Amount Received						
Street Address	City		State	Zip Code		•				
Total of Section G										

	I. MONETARY RECEIPTS (Section A-K)										
NAME OF COMM	ITTEE				FILING DUE DATE						
Jason 2010	Jason 2010										
	H. Public Grant Funds Received from the Citizen's Election Fund										
Purpose of Grant: Initial Primary	General or Special Election	Supplemental/Independ Primary	dent Expenditure General or Special Election	Date Received	Amount						
1	ost Election Deficit	Supplemental/Excess E Primary	Expenditure General or Special Election								
				Total of Section	н						

I. MONETARY RECEIPTS (Section A-K)									
NAME OF COMMITTEE				FILI	NG DUE DATE				
Jason 2010	Origi	nal 07/12/2010							
I. Miscellaneous Monetary Receipts not Considered Contributions									
Name			saction		Amount Received				
Street Address	City	State	Zip Code						
Description									
Total of Section 1									

	II. FUNDRAISING	G EVENT ACTIVITY									
NAME OF					FILING I	DUE 1	DATE				
COMMITTEE Jason 2010					Original ()7/12	/2010				
J1. Fundraising Event Information											
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address		City		State	Zip Code				
06/29/2010 N	Dinner Event	4 Starr St		Danbury		СТ	06810				
Was this fundraising event ho	osted at a personal residence?		Yes	x No							
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No							
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	s X No							

II. FUNDRAISING EVENT ACTIVITY										
NAME OF COMMITTEE						FILIN	G DUE DATE			
Jason 2010 Original 0										
J2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items										
Name of the Purchaser Last Name (Individuals ONLY)	First Name	MI	Method of payment: Cash Pe	it Card	Aggregate Amount of Purchases					
Residential Street Address	City	Stat	zip Code	Date Received	Event #					
Items Purchased	•	•	+	•						
				Т	otal of Sec	ction J2				

II. FUNDRAISING EVENT ACTIVITY										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jason 2010							Origin	al 07/12/2010		
J3. In-	Kind Donations Not Consider	red Contributions								
Name of the Donor					Donation G		ess Entity	Fair Market Value of Donation		
Street Address	City		State	Zip	Code	Aggregate value for this even				
Description of Donation	•	Date	e Receive	ed	Event #					
						Total of Se	ction J3			

	III.	NON	NMO	NETARY RECEIPTS					
NAME OF COMMITTEE								FILING 1	DUE DATE
Jason 2010								Original	07/12/2010
	К	. In-K	Kind (Contributions					
Name							Date Receive	ed	Fair Market Value of this Contribution
Street Address			City		State	Zip Code			
Type of Contributor: Individual Committee	Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?		Yes No	Is contributor a principal of a state contractor? If yes, indicate which branch or branches government the contract is with:		espective state		Yes No Legislative	
Is this contribution associated with a fundi- listed in Section J1? If yes, list Event#	raising event	Yes No	Des	cription of In-Kind Contribution			Aggregate contr	ibutions	
							Total of	Section V	

III. Non Monetary Receipts										
NAME OF COMMITTEE							FILING DUE DATE			
Jason 2010							Original 07/12/2010			
L. Refundable Deposit to Telephone Company										
Last Name (Individuals Only)	First Name			MI	Date Received		Amount of Deposit			
Street Address	City		State	Zip Code						
Name of Telephone company										
Street Address	City				State	Zip Code				
Total of Section L										

III. NONMONETA										
NAME OF COMMITTEE						F	ILING DUE DATE			
Jason 2010	C	Original 07/12/2010								
M. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee										
Name of Committee	Name of Treasurer									
Street Address		•		Date N	otice Receiv	ed	Fair Market Value of Donation			
City	State	Zip Code Aggregate Donations				ıs				
Description of Donation		Purpose of Ex	penditure B	С	D	Е				
Total of Section M										

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jason 2010						Origi	nal 07/12/2010
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Deluxe Checks	<u> </u>	l		06/15/2010	Check #		
Street Address 105 Route 46 W				Purpose of Expenditure BNK	X Debit Car	ď	
Description				_ I	Event #		
Checks for the bank account							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought			
Yes No							\$18.50
Name of Payee				Date of Payment	Method of Payı	ment	Amount
USPS				06/23/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u> </u>		
LIBRARY PLACE	Bethel	СТ	06801	POST	X Debit Car	d	
Description			•	•	Event #		
Express mailing to SEEC							
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought? Yes							
X No							\$14.74
					Total of Sec	ction N	\$33.24

	IV.	EXPENDITURES						
NAME OF COMMITTE	EE .						FILING	DUE DATE
Jason 2010							Origina	1 07/12/2010
O. Campaign Expenses Paid By Candidate								
				Date of Payme	29/2010 Claimed?			Amount
Street Address 4 Starr St		City Danbury	State CT	Zip Code 06810	X Yes No			
Purpose of Expenditure FNDR	Description Restaurant costs				Event #	‡ 2010N		\$234.20
						Total of	Section O	\$234.20

		IV. EXPENDITURES					
NAME OF COMMITTEE						FI	LING DUE DATE
Jason 2010						Or	riginal 07/12/2010
	Р. Е	Expenses Incurred on Commit	tee Credit Ca	ırd		•	
Name of Issuing Institution			Type of Credit C	ard:			
			Visa	Master Card	Discover	Ame	rican
Other							
Name of Vendor					Date of Transaction		Amount
Street Address		City	State	Zip Code			
Purpose of Expenditure	Description		Į.		Event #		
					Total of Section	n P	

	IV. EXPE	ENDITURES				
NAME OF CO	MMITTEE				FILING DU	E DATE
Jason 2010					Original 07	/12/2010
	Q. Expenses Incurred By Com	mittee but Not Paid Duri	ng this Period		·	
Name of Creditor Janice Stevens	son		Date Incurred 06/03/2010	Event #		Amount Incurred
Street Address 32 Sunset Hill	Rd	City Bethel	•	State CT	Zip Code 06801	(Estimate or Actual)
Purpose of Expenditure WEB	Description Domain name purchase					
Is this expenditure which reimbursemed Yes X No	Coordinated with another candidate for Other Candida ent is sought?	te(s) Name	Office Sought			\$81.73
Name of Creditor Janice Stevens	son		Date Incurred 06/07/2010	Event #		Amount Incurred (Estimate or
Street Address 32 Sunset Hill	Rd	City Bethel	•	State CT	Zip Code 06801	Actual)
Purpose of Expenditure POST	Description Express Postage			•		
Is this expenditure which reimbursemed Yes X No	coordinated with another candidate for Other Candida ent is sought?	te(s) Name	Office Sought			\$13.65

IV. EXPE	ENDITURES							
NAME OF COMMITTEE				FILING	G DUE DATE			
Jason 2010				Origina	al 07/12/2010			
Q. Expenses Incurred By Committee but Not Paid During this Period								
Name of Creditor Jason Bartlett	_	Date Incurred 06/29/2010	Event # 062920101	N	Amount Incurred (Estimate or			
Street Address 14 Highview Ter	City Bethel		State CT	Zip Code 06801	Actual)			
Purpose of Expenditure FNDR								
Is this expenditure coordinated with another candidate for Which reimbursement is sought? Yes No	ate(s) Name	Office Sought			\$234.20			
			Total of	Section Q	\$329.58			

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Jason 2010					Origii	nal 07/12/2010
R. Itemization of Reimburse	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant		Date of Payment		Method of Payment Check #		Amount
Secondary Payee		Purpose of Expenditure		Debit Card		
Street Address	City	State		Zip Code		
Description				Event #		
which reimbursement is sought?	date(s) Name	Office	Sought	•		
Yes No						
				Total of Se	ection R	

IV. EXPE	ENDITURES				
NAME OF COMMITTEE				FII	LING DUE DATE
Jason 2010				Or	iginal 07/12/2010
S. Surplus Distril	bution of Equipment and Furniture				
Name of Recipient					Original Purchase Amount of Item
Street Address	City	State	Zip Code		
Description					
			Total of Section	on S	